

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE							
							APPLICANT(S)								
CLAIMS															
	AS FILED		AFTER 1ST AMENDMENT		AFTER 3RD AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	IND	DEP	
1							51								
2							52								
3							53								
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43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	7		3				TOTAL IND.								
TOTAL DEP.	7						TOTAL DEP.								
TOTAL CLAIMS	10						TOTAL CLAIMS								